

APPLICATION FOR CONTRACTOR BUSINESS LICENSE FOR YEAR 2008

CITY OF ABBEVILLE
100 COURT SQUARE
P.O. BOX 40
ABBEVILLE, SC 29620
864-459-5017



If no longer in business, please so indicate and return the application along with Form PT-100. The form can be obtained from City Hall.

Business Name and Mailing Address

PLEASE NOTE:

Contractors without a permanent place of business in the City are required to renew their business license for each additional project. Additional projects are only subject to the \$1.30 per thousand for the gross receipts of the project.

PHONE:

LOCATION:

BUSINESS CLASS: 0008

BUSINESS DESC: CONTRACTOR

RESP. PERSON:

TAX ID NUMBER or
SSN Number:

OWNERSHIP TYPE:

Calculation of License Fee Based on Rate Class 8002

RATE

LICENSE FEE

1. Minimum Fee For Class Rate

Note: If gross receipts are less than \$2,000 then only the minimum will be owed.

\$125.00

2. Gross Receipts \$ _____ (For this Current Project)

3. Less \$ - \$2,000.00

4. Total \$ _____

Note: Amount in Line 4 should be rounded up to the nearest thousand.

5. Divide by \$ + \$1,000.00

6. Total \$ _____

X \$1.30

Multiply Amount in (No. 6) By Class Rate

7. Total of Minimum Fee and Class Rate Calculation

Line 1 + Line 6

=

Total Payment

Licensee/Owner Signature

Title

Date

Responsible Person/Manager Signature

Title

Date

Applicant Signature

Title

Date